FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jun 18 1996 8:00 am
Secretary of State

DOCUMENT # 764071 (7)

1. Corporation Name
GOVERNOR"S MANOR CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business | Mailing Address

2. Principal Place of Business	2a. Mailing Address
21 c/o Clinton Int'l Group	26 c/o Clinton Int'l Group
Street Address, Apt. #, etc. 22 2121 Ponce de Leon Blvd. PHII	Street Address, Apt. #, etc. 27 2121 Ponce de Leon Blvd. PHII
City & State 23 Coral Gables, FL	City & State 28 Coral Gables, FL
Zip 24 33134 Country 25 USA	Zip 29 33134 Country 30 USA

3. Date Incorporated or Qualified: 07/07/1982
3a. Date of Last Report: 05/01/95
4. FEI Number: 59-2098510 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

BOGGIO, LLOYD J.
168 SE FIRST STE #1200
MIAMI, FL 33131

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 2121 Ponce de Leon Blvd PHII
83
84 City: Coral Gables **FL** 85 Zip Code: 33134

11. Pursuant to the provision of Section 607.0122 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [signature] DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HOWARD, PAT ☐ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	☐ Change ☐ Addition 2121 Ponce de Leon Blvd PHII Coral Gables, FL 33134
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BOGGIO, LLOYD J. ☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	☐ Change ☐ Addition 2121 Ponce de Leon Blvd. PHII Coral Gables, FL 33134
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MARSHALL, NANCY 2121 Ponce de Leon Blvd PHII Coral Gables, FL 33134 ☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	☐ Change ☐ Addition 800001866828 -06/19/96--01041--042 ***200.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	☐ Change ☐ Addition 800001866830 -06/19/96--01041--043 ***25.00 6/18

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or added above.

SIGNATURE: [signature] LLOYD J. BOGGIO (305) 441-8188
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #